CAMPAIGN CONTRIBUTION		A .	REPORT	State	of Nevada
eare Officers Researce	T Dri	ociation 6	f Neund	4	histrict (if applicable)
P.O. Box 40415- Ro		· 84504-0	1415		ristrict (if applicable)
lailing Address (include city and zip code) REHER O FARAN .	066.			Telephone No.	
-Mail Address					
elect Appropriate Box(es) CANDIDATE	PAC □B	AG []POLPRI	Y []INDEXP[AMENDED A	NNUAL FILING
Appeal Filing Due ton		-			
Annual Filing - Due Jan Period: January 1, 2003 - December	uary 15, 2 31, 2003	2004		FIL	E ,
					hed
Report #1 — Due August 3		 	,	OCT 2 6	2004 AV
cumbents in an Office with a 6-year term Pe	eriod: Dec.	5, 2001 — Aug 26, 20, 1998 — Aug 26	, 2004	DEAN HE	LI ER
	eriod: Jan. eriod: Dec.	1, 2004 - Aug. 26, 2 5, 2002 - Aug 26, 3	2004 2004	SECRETARY (F STATE
Report #2 Due October					Al.
		27, 2004 Oct. 21	, 2004	FOR O	FICE USE ONLY
Report #3 Due — January	15, 2005*				-
Pe	riod: Oct.:	22, 2004 — Dec. 31 22, 2004 <i>-</i> Dec. 5, 3			
_			LV-7		
Annual Filing – Due Janua Period: January 1, 2004 – Dec	ember 31, 2	004			
hird Report suffices for 2005 Annua	I Filing if c	andidate also fi	led Report Nos	. 1 and 2	
		,			Cumulative
CONTRIBUTIONS SU	MMARY	,			From Beginning of Report Period
				This Period	#1 through End of This
•		•			Reporting Period
1. Total Monetary Contributions Recei	ived in Exces	s of \$100		Ø	129221.5
Total Monetary Contributions Recei	ived of \$400 a			\sim	1000
2. Total monetary continuations neces	ived of \$ 100 (or Less			
		This Period	Cumulative From Beginning of		
			Report Period #1 Through End of	4	
		Ø	This Reporting Period		
3. Total Amount of Monetary Contri Received	butions	7		_	1
(Add Lines 1 and 2)				Ø	29331.5
 Total Value of In Kind Contributions Excess of \$100 	Received in	\nearrow	l Ø		
			-	_	
		PENSES SUI	MMARY		
5. Total Monetary Expenses Paid in E		0		2936.22	16077.8
 Total Monetary Expenses Paid of \$1 Total Amount of All Monetary Exp 	100 or Less			100.00	1.3550
(Add Lines 5 and 6)				3036.22	19 627.
 Total Value of In Kind Expenses in E of \$100 	excess	α	(X	***************************************	
	*		1 X)	_	
		AFFIRMATI	ON		
eclare Under Penalty of Perjury That th	e Foregoing	is True and Co	rrect.		
·					
711001 -		_			
TUPPL -P.	Shald	R. D.	ر مار	11)-90	-64
TUNDL - R	andd	P. Do	eles	/0 -25 Date	-64

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Peace	Officers Research	Auscietion of	Neuada	
Name (print)		Office (if applicable)		District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN

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Reace Officers Roseard Association of Neural.
Name (print) Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Ron Drehen P.O. Box 40502 Reno NU F9504	F	9-8-04	1, 196.41
II	F	10-6-04	1310.94
Ad Spec. P.O. Box 10487 Reno, Nu. 89510	D	9-27-64	405.00
N	\mathcal{D}	10-21-64	29.87
			V
			·-

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